## Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yoursel	f	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is your government-issu picture identification (texample, your driver's license or passport).  Bring your picture identification to your meeting with the truster	First name  R  Middle name  Chavez	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you used in the last 8 year Include your married of maiden names.	<sup>ars</sup> Candice R. Nielsen	
3.	Only the last 4 digits your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5418	

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 2 of 58

Case number (if known)

Debtor 1 Candice R Chavez

		About Debtor 1:	Δ	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	В	I have not used any business name or EINs.
		EINs	E	EINs
5.	Where you live	214 Clinton Ct.	If	Debtor 2 lives at a different address:
		Wheaton, IL 60187  Number, Street, City, State & ZIP Code	N	lumber, Street, City, State & ZIP Code
		DuPage		
		County	C	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	ir	Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	٨	Jumber, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	C	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 3 of 58

Case number (if known)

Debtor 1 Candice R Chavez

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

		Document	Page 4 of 58	
ebtor 1	Candice R Chavez		Case number (if known)	

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busir	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	k the appropriate box	to describe your business:		
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13. Are you filing under  Chapter 11 of the  Bankruptcy Code and are you a small business debtor so that it can so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).  debtor?			small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am r	not filing under Chapte	er 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention		
	Do you own or have any	■ No.	- razara	rue i reporty or runy	Troporty That Hoode Illinounder Allerine.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Chart City Chate 9 7 or de		
					Number, Street, City, State & Zip Code		

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 5 of 58

Debtor 1 Candice R Chavez

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

<b>About Debtor 2</b>	(Spouse	Only in a	Joint	Case):
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You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debt	or 1 Candice R Chave	z	Document	Page 6 of 58	er (if known)		
Part			norting Purposes				
16.	What kind of debts do	16a.	Are your debts primarily consum		fined in 11 U.S.C. § 101(8) as "incurred by an		
	you have?		individual primarily for a personal, f  ☐ No. Go to line 16b.	amily, or household purpose."			
			Yes. Go to line 17.				
			Are your debts primarily business money for a business or investmen				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consumer debts or busine	ess debts		
	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	are paid that funds will be available	estimate that after any exempt proet to distribute to unsecured creditors	perty is excluded and administrative expenses?		
			■ No □ Yes				
	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you		<u>-</u>	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$100,0	10,000 11 - \$100,000 101 - \$500,000 101 - \$1 million	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 101 - \$500,000 101 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	7: Sign Below						
For y	<b>y</b> ou	I have exa	amined this petition, and I declare u	nder penalty of perjury that the info	rmation provided is true and correct.		
					proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, ch chapter, and I choose to proceed under Chapter 7.		
			torney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ent, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request i	relief in accordance with the chapte	r of title 11, United States Code, spe	ecified in this petition.		
		bankrupto and 3571.	y case can result in fines up to \$25		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519		
		Candice	R Chavez of Debtor 1	Signature of Debt	or 2		
		Executed	on July 25, 2018	Executed on			

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Candice R Chavez

Document Page 7 of 58

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John J	Lynch	Date	July 25, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
John J I vi	nch 6270193		
Printed name			
	V Offices, P.C.		
Firm name			
	enville Road, Ste. 150		
Lisle, IL 60			
Number, Street,	City, State & ZIP Code		
Contact phone	630-960-4700	Email address	JLynch@Lynch4Law.Com
6270193 IL	_		
Bar number & St	ate		<del></del>

		Docume	ent Page 8 of 58	
Fill in this info	rmation to identify your	case:		
Debtor 1	Candice R Chave	z		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,457.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,457.00
Pa	t 2: Summarize Your Liabilities		
			<b>abilities</b> I you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	82,086.08
	Your total liabilities	\$	82,086.08
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,592.82
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,568.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Case 18-21134 Document

Page 9 of 58 Case number (if known) Debtor 1 Candice R Chavez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,284.20 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in	this inform	nation to identify your c	case and	this filing:	em Page 10	UL 36		
Debto	r 1	Candice R Chavez						
Dobto	r 0	First Name	Mid	dle Name	Last Name			
Debtoi (Spouse	r ∠ e, if filing)	First Name	Mid	dle Name	Last Name			
United	l States Ba	nkruptcy Court for the:	NORTHE	RN DISTRICT	OF ILLINOIS			
Case r	number _	_						Check if this is an
								amended filing
Offic	cial Fo	rm 106A/B						
		e A/B: Prope	ertv					12/15
think it i informa Answer	fits best. B ation. If more every ques	e as complete and accurate e space is needed, attach a stion.	te as possi a separate	ble. If two marr sheet to this fo	ied people are filing toget rm. On the top of any add	nore than one category, list her, both are equally respo itional pages, write your na	sible for supply	ying correct
Part 1:		Each Residence, Building,						
1. <b>Do y</b>	ou own or l	nave any legal or equitable	interest in	any residence	, building, land, or similar	property?		
■ N	o. Go to Par	t 2.						
☐ Ye	es. Where i	s the property?						
Part 2:	Describe	Your Vehicles						
3. <b>Car</b> : □ N ■ Y	lo	ucks, tractors, sport util	ility vehic	les, motorcyc	les			
3.1	Make:	Chervolet	,	Who has an inte	erest in the property? Chec	rk one		s or exemptions. Put
	Model:	Tahoe		■ Debtor 1 only		the amount		aims on <i>Schedule D:</i> Secured by Property.
	Year:	2002		Debtor 2 only		Current val	ue of the C	urrent value of the
	Approximat			Debtor 1 and		entire prope	erty? p	ortion you own?
Г	Other inform	nation: Value via Kelley Blue			of the debtors and another			
	Book on	July 25, 2018 e totaled 5/2018		Check if this (see instruction	is community property		\$200.00	\$200.00
	<i>mples:</i> Boa Io	rcraft, motor homes, AT ts, trailers, motors, persor						
.paç	ges you ha _		Write tha	t number here		luding any entries for =	>	\$200.00
		Your Personal and House			no following its		0:	ront volue of the
ро уо	u own or I	have any legal or equita	idie intere	est in any of the	ne rollowing items?		<b>por</b> t Do i	rent value of the tion you own? not deduct secured ns or exemptions.
6. <b>Ho</b> u	sehold go	oods and furnishings					Cidii	S. C.C. Iptiono.

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Dobtor 1	Case 18-211		Filed 07/27/18 Document	Entered 07/27/18 15:4 Page 11 of 58 Case number	2:27 Desc Main
Debtor 1	Candice R Chave	ez		Case number	;ii known)
■ Yes.	Describe				
		usehold Goods Resale Value	and Furnishings Lo	ocated at Debtor's Residence.	\$500.00
□ No	es: Televisions and ra	dios; audio, video, nes, cameras, medi		oment; computers, printers, scanners	; music collections; electronic devices
	Се	Ilular Phone and	d Electronic Items		\$650.00
■ No □ Yes.  9. Equipme Example	other collections, r Describe ent for sports and ho	nemorabilia, collect  bbbies  nic, exercise, and c	tibles		amp, coin, or baseball card collections; canoes and kayaks; carpentry tools;
□ No	oles: Pistols, rifles, sho		n, and related equipment  Vest German Made)		
		vage Arms Axis			\$1,200.00
□ No	oles: Everyday clothes Describe	, furs, leather coats	s, designer wear, shoes, of Debtor	accessories	\$250.00
□ No ´	oles: Everyday jewelry Describe	, costume jewelry,		ding rings, heirloom jewelry, watches	s, gems, gold, silver \$1,000.00
Example No ☐ Yes.  14. Any oth No	rm animals  bles: Dogs, cats, birds,  Describe	horses usehold items you		ncluding any health aids you did n	ot list

Official Form 106A/B Schedule A/B: Property page 2

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 12 of 58 Case number (if known)

Debtor 1 **Candice R Chavez** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,600.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash on Hand \$60.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$600.00 17.1. Checking **Chase Bank** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA ETrade Securities** \$1,997.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

		Case 18-21134	Doc 1	Filed 07/27/18 Document	Entered 07/27/18 15:42:27	Desc Main		
D	ebtor 1	Candice R Chavez		Document	Page 13 of 58  Case number (if known)			
24.	26 U.S.C ■ No	C. §§ 530(b)(1), 529A(b), and	d 529(b)(1).		ogram, or under a qualified state tuition property of the records of any interests.11 U.S.C. § 521(c)	ogram.		
	☐ Yes		ne and desc	приоп. Зерагатету ше п	ie records of any interests. IT 0.3.C. § 521(c)			
25.	■ No	equitable or future interes  Give specific information ab		rty (other than anythin	g listed in line 1), and rights or powers ex	ercisable for your benefit		
26.	Examp ■ No	, copyrights, trademarks, les: Internet domain names,	websites, p					
	⊔ Yes.	Give specific information ab	out them					
27.	Examp  ■ No	es, franchises, and other g les: Building permits, exclus Give specific information ab	ive licenses		n holdings, liquor licenses, professional licens	ses		
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.		
28.	Tax refu	unds owed to you						
	■ No	·						
	☐ Yes. (	Give specific information about	out them, inc	cluding whether you alread	ady filed the returns and the tax years			
						-		
29.	■ No			usal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement		
30.	Examp	mounts someone owes yo les: Unpaid wages, disability benefits; unpaid loans y	insurance		efits, sick pay, vacation pay, workers' compe	ensation, Social Security		
	■ No □ Yes.	Give specific information						
31.	_Examp	s in insurance policies les: Health, disability, or life	insurance; h	nealth savings account (I	HSA); credit, homeowner's, or renter's insura	nce		
	■ No □ Yes. N	Name the insurance compar	ny of each p	olicy and list its value.				
			any name:		Beneficiary:	Surrender or refund value:		
32.	32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.							
	■ No □ Yes.	Give specific information						
33.	33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue							
	_	Describe each claim						
			Works	rman Compensation	n Claim			
				ey Dave Kosin - Chi		Unknown		

	Case 18-21134 Doc 1	Filed 07/27/18		7/27/18 15:42:27	Desc Main
Deb	or 1 Candice R Chavez	Document	Page 14 of	Case number (if known)	
	Other contingent and unliquidated claims of No  Yes. Describe each claim	every nature, including	g counterclaims o	of the debtor and rights to	set off claims
25 /	ny financial accets you did not already list				
	ny financial assets you did not already list No				
	Yes. Give specific information				
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here				\$2,657.00
	101 Fart 4. Write that number here				
Part	Describe Any Business-Related Property You	Own or Have an Interest I	n. List any real esta	ate in Part 1.	
37 D	o you own or have any legal or equitable interest i	n any business-related pr	operty?		
_	No. Go to Part 6.	n any baomico rolatoa pi	opolity.		
	Yes. Go to line 38.				
Dout	Describe Any Form and Commercial Fishing I	Palatad Dramarty Var. Own	ar Hava an Interna	n4 lm	
Part	Describe Any Farm- and Commercial Fishing-F If you own or have an interest in farmland, list it in		or have an interes	St III.	
46 <b>[</b>	o you own or have any legal or equitable in	terest in any farm- or c	ommercial fishin	ng-related property?	
	No. Go to Part 7.	erest in any famil- of c	ommerciai nsiin	ig-related property:	
	☐ Yes. Go to line 47.				
	_ 100. 00 to line 11:				
Part	7: Describe All Property You Own or Have a	n Interest in That You Did	Not List Above		
	<b>to you have other property of any kind you</b> d Examples: Season tickets, country club membe				
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from	om Part 7. Write that no	umber here		\$0.00
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$200.00		
57.	Part 3: Total personal and household items	, line 15	\$3,600.00		
58.	Part 4: Total financial assets, line 36		\$2,657.00		
59.	Part 5: Total business-related property, line		\$0.00		
60.	Part 6: Total farm- and fishing-related prope		\$0.00		
61.	Part 7: Total other property not listed, line 5	4 +	\$0.00		
62.	Total personal property. Add lines 56 through	າ 61	\$6,457.00	Copy personal property t	otal <b>\$6,457.00</b>
63.	Total of all property on Schedule A/B. Add li	ne 55 + line 62			\$6,457.00

Official Form 106A/B Schedule A/B: Property page 5

		I A A A HIII.	111111111111111111111111111111111111111	<i>/</i> / / / / / / / / / / / / / / / / / /
Fill in this infor	mation to identify your	case:		
Debtor 1	Candice R Chave	Z		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Aiii	ount of the exemption you claim	opeome laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2002 Chervolet Tahoe 277000 miles Current Value via Kelley Blue Book on July 25, 2018 - vehicle totaled 5/2018 Line from <i>Schedule A/B</i> : 3.1	\$200.00	•	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Household Goods and Furnishings Located at Debtor's Residence.	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
- Resale Value Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Cellular Phone and Electronic Items Line from Schedule A/B: 7.1	\$650.00		\$650.00	735 ILCS 5/12-1001(b)
Zino nom concurso 772.			100% of fair market value, up to any applicable statutory limit	
Sig Sauer P226 (West German Made)	\$1,200.00		\$1,200.00	20 ILCS 1805/10
Springfield XD Mod.2 Savage Arms Axis 2 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Personal Clothing of Debtor Line from Schedule A/B: 11.1	\$250.00		\$250.00	735 ILCS 5/12-1001(a)
Line from Sofiedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 16 of 58
Case number (if known)

Candice & Chavez					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B				
Rings and Jewelry Items Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Line from Goriedate 772.			100% of fair market value, up to any applicable statutory limit		
Cash on Hand Line from Schedule A/B: 16.1	\$60.00		\$60.00	735 ILCS 5/12-1001(b)	
Line from Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit		
Checking: Chase Bank Line from Schedule A/B: 17.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit		
IRA: ETrade Securities	\$1,997.00			735 ILCS 5/12-1006	
Line from Schedule A/B: 21.1		•	100% of fair market value, up to any applicable statutory limit		
<ul> <li>Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every</li> <li>No</li> </ul>			led on or after the date of adjustmen	nt.)	
☐ Yes. Did you acquire the property cove☐ No	ered by the exemption wi	ithin 1	,215 days before you filed this case	?	
☐ Yes					

Fill in this infor					
Debtor 1	Candice R Chave	Z			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

		Document	Page 18 of !	58			
Fill in this inform	nation to identify your ca	ase:					
Debtor 1	Candice R Chavez						
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
(Spouse II, IIIIIIg)	First Name	ivildale Name	Last Name				
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS				
Case number							
(if known)						Check i	f this is an
						amende	ed filing
O#: -: -! F	- 400E/E						
Official Form			01-1				40/45
		no Have Unsecured Part 1 for creditors with PRIORIT					12/15
Schedule G: Execut Schedule D: Credito	tory Contracts and Unexpir ors Who Have Claims Secu tinuation Page to this page	nat could result in a claim. Also ed Leases (Official Form 106G). I red by Property. If more space is . If you have no information to re	Do not include any cre needed, copy the Part	editors with partially s t you need, fill it out, i	ecured clair number the	ms that ar entries in	e listed in the boxes on the
Part 1: List Al	I of Your PRIORITY Uns	ecured Claims					
1. Do any credito	rs have priority unsecured	claims against you?					
☐ No. Go to Pa	art 2.						
Yes.							
identify what typ possible, list the	be of claim it is. If a claim has a claims in alphabetical order	If a creditor has more than one pric both priority and nonpriority amour according to the creditor's name. If icular claim, list the other creditors	nts, list that claim here a you have more than tw	and show both priority a	ind nonpriorit	y amounts	s. As much as
(For an explana	ation of each type of claim, se	e the instructions for this form in the	e instruction booklet.)				
				Total claim	Priority amount		Nonpriority amount
2.1 Illinois I	Department of Reven	ue Last 4 digits of accou	ınt number	\$0.00		\$0.00	\$0.00
Priority Cre	editor's Name				-	*****	
	otcy Section	When was the debt in	ncurred?		-		
PO Box	64338 o, IL 60664-0338						
	reet City State Zlp Code	As of the date you file	e, the claim is: Check a	all that apply			
Who incurred	the debt? Check one.	☐ Contingent					
Debtor 1 o	nly	☐ Unliquidated					
Debtor 2 o	nly	Disputed					
☐ Debtor 1 a	nd Debtor 2 only	Type of PRIORITY un	secured claim:				
_	e of the debtors and another	☐ Domestic support of	bligations				
_	his claim is for a communi	Tayes and certain of	other debts you owe the	government			
	subject to offset?	=	personal injury while yo				
■ No	,	☐ Other. Specify					
☐ Yes			otice Only				

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 19 of 58

Deb	tor 1 Candice R Chavez	——————————————————————————————————————	Case number (if know)			
2.2	Internal Revenue Service (IRS)	Last 4 digits of account number	\$0.00	\$0.00 \$0.00		
	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government			
	Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated			
	No	Other. Specify				
	Yes	Notice Only		<del></del>		
Part	2: List All of Your NONPRIORITY Unsecu	red Claims				
<b>4.</b>	Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what t	ype of claim it is. Do not list claims already in	cluded in Part 1. If more		
4.4	Ally Financial	land delimita of account mountain	0402			
4.1	Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Po Box 380901	Last 4 digits of account number  When was the debt incurred?	9103 Opened 03/14 Last Active 07/17	\$6,589.00		
	Bloomington, MN 55438			=		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts			
	■ No	☐ Debts to pension or profit-sharin	•			
	☐ Yes	■ Other. Specify Vehicle Rep	possession			

Document Page 20 of 58 Debtor 1 Candice R Chavez Case number (if know) 4.2 \$1,041.68 **Amita Health** Last 4 digits of account number 6930 Nonpriority Creditor's Name 417 Bridge St When was the debt incurred? Danville, VA 24541-1403 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes 4.3 **Atg Credit LIc** Last 4 digits of account number **Various** \$2,042.00 Nonpriority Creditor's Name 1700 W Cortland St Opened 07/15 Last Active Ste 2 When was the debt incurred? 05/13 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Winfield Radiol ☐ Yes \$897.00 4.4 **Capital One** Last 4 digits of account number 6895 Nonpriority Creditor's Name Attn: General Opened 08/12 Last Active Correspondence/Bankruptcy When was the debt incurred? 05/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Credit Card

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Entered 07/27/18 15:42:27 Case 18-21134 Doc 1 Filed 07/27/18 Desc Main

Page 21 of 58 Document Debtor 1 Candice R Chavez Case number (if know) Central DuPage Emergency 0180 \$971.00 4.5 Last 4 digits of account number **Physicians** Nonpriority Creditor's Name **PO Box 366** When was the debt incurred? N/A Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No **Medical Services** ☐ Yes Other. Specify 4.6 **Dependon Collection Service** Last 4 digits of account number 1475 \$200.94 Nonpriority Creditor's Name PO Box 4833 When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **DuPage Medical Group** 9712 \$4,963.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1100 W. 31st Street, Suite 300 **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes

Document Page 22 of 58 Debtor 1 Candice R Chavez Case number (if know) 4.8 \$50.86 **DuPage Pathology Associates** Last 4 digits of account number 2664 Nonpriority Creditor's Name 520 East 22nd Street When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes 4.9 **Eos Cca** Last 4 digits of account number 6723 \$1,655.33 Nonpriority Creditor's Name Po Box 981002 When was the debt incurred? Boston, MA 02298-1002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **ERC** N/A \$962.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 23870 When was the debt incurred? N/A Jacksonville, FL 32241-3870 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 23 of 58
Candice R Chavez

Candice R Chavez

DCDIC	Candice & Chavez		Case Harriber (II know)			
4.1	Grant & Weber, Inc.	Last 4 digits of account number	5142	\$126.55		
	Nonpriority Creditor's Name 5586 S. Fort Apache Road	When was the debt incurred?				
	Suite 110 Las Vegas. NV 89148					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	,	one on an anat apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	• •			
	Yes	Other. Specify Medical Se	rvices			
4.1	Illinois Emergency Med Specialists	Last 4 digits of account number	0053	\$235.40		
2	Nonpriority Creditor's Name	Last 4 digits of account number		<del>+2000</del>		
	PO Box 75121	When was the debt incurred?				
	Chicago, IL 60675-5121  Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim	ъ. Спеск ан шасарру			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	_	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Medical Se	rvices			
4.1	Med Business Bureau	Last 4 digits of account number	Various	\$3,061.00		
3	Nonpriority Creditor's Name	Last 4 digits of account number		ψο,σστισσ		
	1460 Renaissance Dr #400 Park Ridge, IL 60068	When was the debt incurred?	Opened 04/17 Last Active 11/16			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Пу	Collection	Attorney West Central An,			
	☐ Yes	Other. Specify Central Du	Page			

Document Page 24 of 58 Debtor 1 Candice R Chavez Case number (if know) 4.1 Merchants' Credit Guide Co. 0053 \$235.40 Last 4 digits of account number 4 Nonpriority Creditor's Name 223 W. Jackson Blvd When was the debt incurred? #700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Services 4.1 **Midwest Anes Partners** 5069 \$358.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 3613 When was the debt incurred? Carol Stream, IL 60132 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes 4.1 **Nationwide Credit & Collection** 9712 \$5,853.45 6 Last 4 digits of account number Nonpriority Creditor's Name c/o Evergreen Bank Group When was the debt incurred? PO Box 3219 Oak Brook, IL 60522-3219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical Services

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 25 of 58

Debtor	1 Candice R Chavez		Case number (if know)	
4.1	Nationwide Credit & Collections, Inc	Last 4 digits of account number	Various	\$4,961.00
	Nonpriority Creditor's Name Attn: Bankruptcy 815 Commerce Dr Ste 270 Oak Brook, IL 60523	When was the debt incurred?	Opened 10/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin	g plans, and other similar debts Attorney Dupage Medical Group	
	☐ Yes	Other. Specify Conection 1	Attorney Dupage Medical Group	
4.1	Northwestern Medicine Nonpriority Creditor's Name	Last 4 digits of account number	3773	\$43,007.03
	PO Box 4090 Carol Stream, IL 60197-4090	When was the debt incurred?	N/A	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	rvices		
4.1	Physicians Immediate Care-Chicago	Last 4 digits of account number	7290	\$50.00
	Nonpriority Creditor's Name Attn: Billing Department Carol Stream, IL 60197-8799	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Medical Ser	rvices	

Document Page 26 of 58 Debtor 1 Candice R Chavez Case number (if know) 4.2 \$200.00 Suburban Radiologists, SC. 3257 Last 4 digits of account number 0 Nonpriority Creditor's Name 1446 Momentum Place When was the debt incurred? Chicago, IL 60689-5314 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.2 Sudarshan Sharma MD 3533 \$769.44 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 121 North Elm Street Hinsdale, IL 60521-3765 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Services ☐ Yes 4.2 Synchrony Bank/Amazon 5994 \$1,170,00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/13 Last Active Po Box 965060 When was the debt incurred? 04/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Charge Account

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Page 27 of 58 Case number (if know) Document Debtor 1 Candice R Chavez 4.2 Verizon 0001 \$1,402.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Wireless Bankrupty Admin Opened 11/12 Last Active 500 Technology Dr Ste 500 When was the debt incurred? 11/30/15 Weldon Springs, MO 63304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utilities Winfield Laboratory Consultants, 4.2 4800 \$367.00 SC Last 4 digits of account number Nonpriority Creditor's Name **Dept 4408** When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify 4.2 **Winfield Pathology Consultants** 1381 \$221.00 Last 4 digits of account number 5 Nonpriority Creditor's Name **Dept 4432** When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

☐ Yes

debt

■ No

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27

Case 18-21134 Desc Main Document Page 28 of 58 Case number (if know) Debtor 1 Candice R Chavez 4.2 Winfield Radiology Consultants Various \$696.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 29050 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **DuPage Medical Group** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15921 Collections Center Drive ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60693 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Firstsource Advamtage Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 205 Bryant Woods South Part 2: Creditors with Nonpriority Unsecured Claims Buffalo, NY 14228 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Merchant's Credit Guide Co. Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 223 W Jackson Blvd # 700 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MRS BPO LLC Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1930 Olnev Avenue Part 2: Creditors with Nonpriority Unsecured Claims Cherry Hill, NJ 08003 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Receivables Management Partners, Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 2250 E Devon Ave, Ste 352 Des Plaines, IL 60018-4521 Last 4 digits of account number 2255

Receivables Management Partners,

2250 E Devon Ave Ste 245 Des Plaines, IL 60018-4521 On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.26 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

**Total Claim** 

Name and Address

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Case 18-21134 Page 29 of 58 Case number (if know) Document

### Debtor 1 Candice R Chavez

Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that			
mom rait 2	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	82,086.08
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	82,086.08

		17/1/11/11		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Candice R Chave	ez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Enn Meister
215 Clinton Court
Wheaton, IL 60187

State what the contract or lease is for
Home Rental Agreement

		Docume	ent Page 31 d	of 58	
Fill in this	information to identify you	r case:			
Debtor 1	Candice R Chav	(67			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0					
Case num (if known)	ber				☐ Check if this is an
(					amended filing
Officia	l Form 106H				
		1064000			
Sched	lule H: Your Cod	aeptors			12/15
					ate as possible. If two married
our name	and case number (if know)	n). Answer every question			p of any Additional Pages, write
1. 00	you have any codebtors: (	ir you are ming a joint case,	uo not list either spouse	e as a codebior.	
■ No					
☐ Yes	3				
Arizon	hin the last 8 years, have yours, California, Idaho, Louisian  Go to line 3.  S. Did your spouse, former spouse,	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include )
in line Form	e 2 again as a codebtor only	/ if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor			Column 2: The cr	editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedul	
2.1				□ Cohodulo D. lir	•
3.1	Name			Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		
				<b>—</b>	
3.2	News			D Schedule D, lir	
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
-	Number Street				
	City	State	ZIP Code		

## Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 32 of 58

Debtor 1	Candice R Chavez	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number		Check if this is:
(II KHOWII)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
<b>Schedule</b>	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
If you have more than one job,	Employment status	■ Employed	■ Employed	
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed	
employers.	Occupation	Data Analyst	Mechanic	
Include part-time, seasonal, or self-employed work.		Winhere Brake Parts, Inc	J&J Engine and Transmission	
Occupation may include student or homemaker, if it applies.	Employer's address	1331 Schiferl Road Bartlett, IL 60103	452 East St. Charles Road Carol Stream, IL 60188	
	How long employed ti	nere? 1 Year	4 Years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

			non-fili	ng spouse
2.	\$	4,856.70	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	4,856.70	\$	0.00

For Debtor 2 or

For Debtor 1

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 33 of 58

Deb	otor 1	Candice R Chavez	_	(	case nur	mber ( <i>if kr</i>	iown)				
					For De	ebtor 1			r Debtor		
	Con	y line 4 here	4.		\$	4 056	70	no \$	n-filing s	•	
	Cop	y line 4 nere	4.		Ψ	4,856	.70	Ψ_		0.00	<u>'</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	1,263	.88	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b	).	\$	C	.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c	:.	\$		.00	\$_		0.00	<u> </u>
	5d.	Required repayments of retirement fund loans	5d		\$		.00	\$_		0.00	_
	5e.	Insurance	5e		\$		0.00	\$_		0.00	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		\$		0.00	\$_ \$		0.00	_
	5g. 5h.	Other deductions. Specify:	5h		\$		0.00	. —		0.00	_
6		· · · · · · · · · · · · · · · · · · ·			\$ \$			_			
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		· —	1,263		\$_		0.00	_
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,592	.82	\$_		0.00	<u></u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		<b>C</b>			Φ.			
	8b.	monthly net income.  Interest and dividends	8a 8b		\$		0.00	\$_ \$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent		٠.	Φ		.00	Φ_		0.00	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$			¢		0.00	
	8d.	Unemployment compensation	8c 8d		\$		0.00	\$_ \$		0.00	_
	8e.	Social Security	8e		\$		.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	8g	J.	\$	C	.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$	C	.00	+ \$		0.00	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	C	0.00	\$_		0.0	0
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	3 5	592.82	+ \$		0.00	= \$	3,592.82
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	0,0	702.02	-   * -		0.00		0,002.02
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00										
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$	3,592.82
4.5	_		_							Combi month	ned ly income
13.	Do y	rou expect an increase or decrease within the year after you file this form	?								
	_	No. Yes Explain:									
		LES CAUMIN I									

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 34 of 58

Fill	in this information to identify your case:				
Deb	otor 1 Candice R Chavez		Chec	ck if this is:	
	otor 2 ouse, if filing)		_	An amended filing A supplement show 13 expenses as of	ving postpetition chapter
` '			_		
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
	se numberknown)				
	fficial Form 106J				
	chedule J: Your Expenses	filim at 4 a math a m	-4h	allu saasaasiala fa	12/1
info	as complete and accurate as possible. If two married people at ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par	tt 1: Describe Your Household Is this a joint case?				
1.	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Pes. Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
		-		_	□ No
					☐ Yes
					□ No
3.	Do your expenses include	-			☐ Yes
O.	expenses of people other than yourself and your dependents?				
Est exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	elude expenses paid for with non-cash government assistance is value of such assistance and have included it on <i>Schedule I:</i> Yificial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	nclude first mortgag	e 4. \$	S	900.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	S	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as ho</li> </ul>	me equity loans	4d. \$ 5. \$		0.00
◡.					

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 35 of 58

Candice R Chavez	Case nu	mber (if known)	
Utilities:			
6a. Electricity, heat, natural gas	6a	ı. \$	360.00
6b. Water, sewer, garbage collection	6b	o. \$	38.00
6c. Telephone, cell phone, Internet, satellite, and o	cable services 60	:. \$	280.00
6d. Other. Specify:		I. \$	0.00
Food and housekeeping supplies		· \$	525.00
Childcare and children's education costs	8		0.00
Clothing, laundry, and dry cleaning	g		70.00
Personal care products and services		). \$	
•		· <u> </u>	60.00
Medical and dental expenses		. \$	200.00
<b>Transportation.</b> Include gas, maintenance, bus or transportation.	ain fare.	2. \$	315.00
Do not include car payments.		3. \$	60.00
Entertainment, clubs, recreation, newspapers, ma	,		
Charitable contributions and religious donations	14	. \$	50.00
Insurance.	included in lines 4 on 00		
Do not include insurance deducted from your pay or		. •	
15a. Life insurance		ı. \$	0.00
15b. Health insurance		o. \$	450.00
15c. Vehicle insurance		:. \$	85.00
15d. Other insurance. Specify:		I. \$	0.00
Taxes. Do not include taxes deducted from your pay	or included in lines 4 or 20.		<u> </u>
Specify:	16	5. \$	0.00
Installment or lease payments:			
17a. Car payments for Vehicle 1	17a	ı. \$	0.00
17b. Car payments for Vehicle 2	17b	o. \$	0.00
17c. Other. Specify:	170	. \$	0.00
17d. Other. Specify:		I. \$	0.00
Your payments of alimony, maintenance, and sup		•	0.00
deducted from your pay on line 5, Schedule I, You		3. \$	0.00
Other payments you make to support others who		\$	0.00
Specify:	19	, •	0.00
Other real property expenses not included in line			
20a. Mortgages on other property		ı. \$	0.00
20b. Real estate taxes		o. \$	0.00
20c. Property, homeowner's, or renter's insurance		;. \$	0.00
20d. Maintenance, repair, and upkeep expenses		l. \$	0.00
20e. Homeowner's association or condominium due		s. \$ <sub></sub>	0.00
Other: Specify: Auto Maintenance / Repairs	/ Oil Changes 21	. +\$	75.00
Miscellaneous		+\$	50.00
Coloulate your monthly evenences			
Calculate your monthly expenses		\$	0.500.00
22a. Add lines 4 through 21.	Constitution Official Form 100 LO	Ψ	3,568.00
22b. Copy line 22 (monthly expenses for Debtor 2), if		\$	
22c. Add line 22a and 22b. The result is your monthly	y expenses.	\$	3,568.00
Coloulate very monthly retiresees			
Calculate your monthly net income.	francis Only adults I	Φ.	
23a. Copy line 12 (your combined monthly income)		ı. \$	3,592.82
23b. Copy your monthly expenses from line 22c abo	ove. 23b	o\$	3,568.00
00 014 4 4			
23c. Subtract your monthly expenses from your mo	nthly income. 230	:. \$	24.82
The result is your monthly net income.	230	" L <del>"</del>	24.02
Do you expect an increase or decrease in your ex	nances within the year after you file th	is form?	
For example, do you expect to finish paying for your car loan			crease or decrease because
modification to the terms of your mortgage?	waam are year or do you expect your mortgage	payment to III	ordase or decrease necause (
■ No.			
☐ Yes. Explain here:			

## Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 36 of 58

Fill in this infor	mation to identify your	case:			
Debtor 1	Candice R Chave	Z			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)		<del></del>			☐ Check if this is an
					amended filing
Official Forr	m 106Dec				
			Dalitada Oalia	.11	
Declarat	cion About a	ın individuai	<b>Debtor's Sche</b>	auies	12/15
You must file thi obtaining money	s form whenever you fi	le bankruptcy schedules n connection with a bank		ing a false state	ement, concealing property, or 10, or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out bankrı	uptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bank	kruptcy Petition Preparer's Notice,
					, and Signature (Official Form 119)
•	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed witl	n this declaratio	on and
X /s/ Car	ndice R Chavez		Х		

Signature of Debtor 2

Date

Candice R Chavez Signature of Debtor 1

Date July 25, 2018

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 37 of 58

Fill	in this inform	nation to identify you	r case:				
	otor 1	Candice R Chav					
		First Name	Middle Name	Last Name			
l	otor 2 ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS			
Car	se number						
	nown)				-	Check if this is an mended filing	
Sta		of Financial	Affairs for Individable in the second of the		ankruptcy	4/10	
info	rmation. If m		attach a separate sheet to		/ additional pages, write you		
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before			
1.	What is your	current marital statu	ıs?				
	■ Married □ Not mar	ried					
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?			
	■ No □ Yes. List	ist all of the places you lived in the last 3 years. Do not include where you live now.					
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
<b>3.</b> state					ity property state or territory co, Texas, Washington and W		
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).			
Par	t 2 Explain	n the Sources of You	r Income				
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?	
	□ No						
	Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$29,140.19	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		

Official Form 107

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Case 18-21134 Page 38 of 58
Case number (if known) Document

Debtor 1 Candice R Chavez

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen inuary 1 to		31, 2017 )	■ Wages, commissions, bonuses, tips	\$61,050.00	☐ Wages, commission bonuses, tips	ns,
				☐ Operating a business		☐ Operating a busines	SS
Fo (Ja	r the calend nuary 1 to	dar year be December	fore that: 31, 2016 )	■ Wages, commissions, bonuses, tips	\$22,200.00	☐ Wages, commission bonuses, tips	ns,
				☐ Operating a business		☐ Operating a busines	ss
5.	Include ind and other winnings. I List each s	come regard public bene f you are fil	lless of wheth fit payments; ing a joint cas he gross inco	e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	amples of other income are all lest; dividends; money collect you received together, list it or	ed from lawsuits; royaltie nly once under Debtor 1.	cial Security, unemployment s; and gambling and lottery
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy		
6.	□ No.	Neither Deindividual   During the   No.   Yes   * Subject	90 days before Go to line 7 List below expaid that created to adjustment or Debtor 2 or	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, die ach creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years roughly beautiful to be the bankruptcy, die ebtor 2 has primarily consure you filed for bankruptcy, die	Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on the timer debts.	of \$6,425* or more?  n one or more payments a ations, such as child suppor after the date of adjust	and the total amount you port and alimony. Also, do
			•		u you pay any creditor a total	or \$600 or more:	
		■ No. □ Yes	Go to line 7	ach creditor to whom you pai	d a total of \$600 or more and	the total amount you so:	d that creditor. Do not
		□ res	include pay	ach creditor to whom you pai ments for domestic support ol this bankruptcy case.			
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you Was t	this navment for

paid

still owe

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 39 of 58

Debtor 1	Candice R Chavez	Document	Cas	se number (if known)		
<i>Insid</i> of ware a bu	hin 1 year before you filed for bankr ders include your relatives; any genera hich you are an officer, director, perso usiness you operate as a sole proprieto ony.	al partners; relatives of any go in in control, or owner of 20%	eneral partners; partners or more of their votin	erships of which yo g securities; and a	u are a general p ny managing age	artner; corporation nt, including one fo
•	No					
□ Ins	Yes. List all payments to an insider.	Dates of payment	Total amount	Amount you	Reason for thi	is pavment
		zaioc ei payiiieiii	paid	still owe		
insi	hin 1 year before you filed for bankr der? ude payments on debts guaranteed or		ayments or transfer a	any property on a	ccount of a debt	that benefited ar
	No Yes. List all payments to an insider					
_	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	
art 4:	Identify Legal Actions, Reposses	cions and Forcelecures				
	No Yes. Fill in the details. se title	Nature of the case	Court or agency		Status of the o	case
). With	se number hin 1 year before you filed for bankr		perty repossessed, f	foreclosed, garnis	shed, attached, s	seized, or levied?
Che	ck all that apply and fill in the details b	elow.				
	Yes. Fill in the information below.					
Cre	editor Name and Address	Describe the Property	у	Date		Value of the property
		Explain what happen	ed			
Att	y Financial tn: Bankruptcy	Honda Civic		Sept 2017	ember 28,	\$10,300.00
	Box 380901 comington, MN 55438	■ Property was repos				
Div	Johnnigton, Mrt 33430	☐ Property was forecl☐ Property was garnis				
		☐ Property was attach				
	hin 90 days before you filed for ban ounts or refuse to make a payment			nancial institution	ı, set off any amo	ounts from your
	No					
	Yes. Fill in the details.					
Cre	editor Name and Address	Describe the action t	ne creditor took	Date	action was	Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

■ No

☐ Yes

taken

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Case 18-21134

Page 40 of 58
Case number (if known) Document Debtor 1 Candice R Chavez

Pa	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrupto	cy, did you give any gifts with a total value of more t	han \$600 per person	?					
	■ No								
	☐ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrupto	cy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?					
	■ No								
	☐ Yes. Fill in the details for each gift or contr	ibution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value					
Pa	rt 6: List Certain Losses								
	or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any							
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
	rt 7: List Certain Payments or Transfers	,							
16.	consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prepinclude.	<ul> <li>did you or anyone else acting on your behalf pay or paring a bankruptcy petition?</li> <li>arers, or credit counseling agencies for services require</li> </ul>		rty to anyone you					
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Lynch Law Offices, P.C. 1011 Warrenville Road, Suite 150 Lisle, IL 60532	\$1,000.00	September 29, 2017	\$1,000.00					
	Summit Financial Education 4800 W. Flower Street Tucson, AZ 85712	\$14.95 for Credit Counseling Course	June 27, 2017	\$14.95					
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you No  Yes. Fill in the details.		or transfer any prope	rty to anyone who					
	Person Who Was Paid	Description and value of any property	Date payment	Amount of					
	Address	transferred	or transfer was made	payment					

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Page 41 of 58
Case number (if known) Document

Debtor 1 Candice R Chavez

	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes, Fill in the details.				
	Person Who Received Transfer Address	Description and property transfer	red p	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pri ■ No □ Yes. Fill in the details.		ny property to a self-s	settled trust or similar device o	of which you are a
	Name of trust	Description and	value of the property	transferred	Date Transfer was made
<b>Par</b> 20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso No	cy, were any financial ac or other financial accou	ecounts or instrumen	nts held in your name, or for yo	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.	year before you filed fo	r bankruptcy, any saf	fe deposit box or other deposi	tory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1 year	before you filed for bankruptc	y?
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S tate and ZIP Code)		cribe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any property you	u borrowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property (Number, Street, City, Scode)		cribe the property	Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Case 18-21134 Page 42 of 58
Case number (if known) Document

Debtor 1 **Candice R Chavez** 

_	regulations controlling the cleanup of thes						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an en		waste, hazardous substance, toxic s	substance,			
	hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings th	nat you know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that	at you may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site	Governmental unit	Environmental law, if you	Date of notice			
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of Hotice			
25.	Have you notified any governmental unit of	f any release of hazardous material?					
	<b>=</b>						
	■ No □ Yes. Fill in the details.						
	Name of site	Governmental unit	Environmental law, if you	Date of notice			
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)					
26	Unio veri been a mantir in any indicial ar ad	· ·	renmental law? Include cottlements				
20.	Have you been a party in any judicial or ad	ministrative proceeding under any envir	onmentariaw? include settlements a	and orders.			
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name	Nature of the case	Status of the case			
	Cudo Humbol	Address (Number, Street, City, State and ZIP Code)		Cuoc			
		,					
Par	111: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have any	y of the following connections to any	/ business?			
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability com	pany (LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	xecutive of a corporation					
	☐ An owner of at least 5% of the votin	ng or equity securities of a corporation					
	■ No. None of the above applies. Go to	Part 12.					
	☐ Yes. Check all that apply above and fil	II in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification numbe				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
			Dates business existed				
28.	Within 2 years before you filed for bankrup	tcy, did you give a financial statement to	o anyone about your business? Inclu	ude all financial			
institutions, creditors, or other parties.							
	■ No						
	☐ Yes. Fill in the details below.						

## Part 12: Sign Below

Name

**Address** 

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

**Date Issued** 

Official Form 107

(Number, Street, City, State and ZIP Code)

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Page 43 of 58
Case number (if known) Document

Debtor 1 Candice R Chavez

rith a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571.					
/s/ Candice R Chavez					
Candice R Chavez Signature of Debtor 1	Signature of Debtor 2				
Date _July 25, 2018	Date				
Did you attach additional	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?				
No					
☐ Yes					
Did you pay or agree to pa	ay someone who is not an attorney to help you fill out bankruptcy forms?				
No					
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 44 of 58

Fill in this infor	mation to identify your	case.		
Debtor 1	Candice R Chave			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo		n for Individu	ıals Filing Under	Chapter 7 12/15
If you are an ind	lividual filing under cha	pter 7, you must fill out t	his form if:	
creditors have	e claims secured by yo	ur property, or		
You must file th	is form with the court w ever is earlier, unless th		le your bankruptcy petition or I	by the date set for the meeting of creditors, it copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 45 of 58

Debtor 1 Candice R Chavez			Case number (if known)		
[ [	name:  Description of property  securing debt:		•	☐ Yes	
Par or	rt 2: List Your Unexpired Pers any unexpired personal proper he information below. Do not lis	conal Property Leases ty lease that you listed in Schedule G: Exe t real estate leases. Unexpired leases are I sonal property lease if the trustee does no	eases that are still in effect; t	the lease period has not yet ended.	
De	scribe your unexpired personal	property leases		Will the lease be assumed?	
Les	ssor's name: Enn Meiste	er		□ No	
	scription of leased Home Ren operty:	tal Agreement		■ Yes	
Jnd	sign Below  der penalty of perjury, I declare apperty that is subject to an unexp	hat I have indicated my intention about an ired lease.	y property of my estate that s	secures a debt and any personal	
X	/s/ Candice R Chavez Candice R Chavez Signature of Debtor 1	X	nature of Debtor 2		
	Date <b>July 25, 2018</b>	Date			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

# Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 50 of 58

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court** Northern District of Illinois

In re	Candice R Chavez		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTOI	RNEY FOR DE	BTOR(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,900.00	
	Prior to the filing of this statement I have received			1,030.00	
	Balance Due		\$	870.00	
2. \$	335.00 of the filing fee has been paid.				
3. Т	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	■ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are memb	pers and associates of my law firm	1.
I	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				
6. l	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy ca	ase, including:	
b c	a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed]	atement of affairs and plan which	may be required;		
7. E	By agreement with the debtor(s), the above-disclosed	fee does not include the following	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a ankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
Jι	uly 25, 2018	/s/ John J Lynch			
Date		John J Lynch 62 Signature of Attorne			
		Lynch Law Office	es, P.C.		
		1011 Warrenville	Road, Ste. 150		
		Lisle, IL 60532 630-960-4700 Fa	x: 630-324-7131		
		JLynch@Lynch4			
		Name of law firm			

Case 18-21134 Doc 1 Filed 07/27/18 Entered 07/27/18 15:42:27 Desc Main Document Page 51 of 58

Lynch Law Offices, P.C.

# **CHAPTER 7 - BANKRUPTCY RETAINER AGREEMENT**

Client Name: Caudie 7 Chare	Date: 7 27/18
The undersigned, (Client), retains Lynch Law Offices, P.C. (Attorney) to repaccepts this employment. Attorney has agreed to represent client for a 6 \$2,195.00 Joint with estimated cost of \$ 375.00 Individual / \$415.00 Joint (\$40.00 individual / \$80.00 joint) and all pacer fees, postage and copies.	Chapter 7 Bankruptcy Attorney Fee of \$ 1,995.00 individual /
Total due to File the Bankruptcy: \$2,610.00 Joint Case  Minimum Down payment today of \$ <u>\$500.00</u>	\$ 2,370.00 Individual Case Balance Due to file \$
Balance to be paid as follows: Auto Debit -	
Lynch Law Offices, P.C. Pre-Petition Attorney Fee is \$	Costs Paid \$ Costs Due \$
I understand that after my Bankruptcy is filed; I may sign a second reta Services to be performed by Lynch Law Offices, P.C. I understand that such an agreement however, Lynch Law Offices, P.C. reserves the righ Order dated 2/17/04 & Local Bankruptcy Rule 2091-1 B) in the event t	I will be under no obligation to do so and can refuse to sign to withdraw representation (pursuant to Local Standing
Payments on the above attorney fee and costs are "advance payment ret payments cover all work done after the free consultation and are perform down payment of \$500.00 is non-refundable. Payments are applied to ye for any work done at \$395.00/hr. attorney time and \$95.00/hr. clerk time the petition is completed and you are notified that a signing appointment unearned fees will be promptly refunded after the delivery of the invoice.	rmed at contract rate and are not refundable. The minimum our "flat fee". If you or we terminate this contract, we will bill you with an accounting within 30 days if requested in writing. Once it is scheduled, 80% of the fee is due and non-refundable. Any
The Terms and Conditions of this agreement and the REQUIRED receipt.	11 U.S.C. 527 Disclosure are attached and I hereby acknowledge
I/we have read the above; the attorney has expla	ined any questions and I agree to all terms.
x Oli	Date: 7 / LT/ 1 F
x	Date:/
Lynch Law Offices, P.C.	Down payment received by:
By: Let J J	Date: Amt

Lynch Law Offices, P.C.

#### **TERMS AND CONDITIONS**

- 1. I/We acknowledge receipt of 11 U.S.C. 527(a) disclosures.
- 2. The attorney fee includes analysis of your financial situation, and rendering advice in determining whether to file a petition in bankruptcy. Preparation and filing of any petition, schedules statement of affairs which may be required, representation at one meeting of creditors.
- 3. Fee does NOT include missed court dates and amendments to schedules, audits and examinations in addition to meeting of creditors, contested matters, non-routine motions, objections to discharge or adversary complaints. Fees for these additional services will be billed at the rate of \$395.00 per hour if necessary and, if requested attorney agrees to provide a separate retainer agreement for these matters.
- 4. No case will be filed in court unless I provide fee, costs and info and I sign my petition. I/We understand collection action (including but not limited to garnishment, levy and foreclosure) continues until case is filed in bankruptcy court.
- 5. I/We understand the option of both Chapter 13 and Chapter 7. I/We understand that the U.S. Trustee may oppose a Chapter 7 filing on grounds of excess income, or abuse, or other grounds.
- 6. I/We understand that my attorney may refuse to sign a reaffirmation agreement on my secured debts if it imposes an undue hardship upon me. One (1) reaffirmation agreements are included in the flat fee. Any additional reaffirmations agreements will be billed separately in the amount of \$150.00 per Agreement.
- 7. I/We understand that Bankruptcy law only permits me to protect a certain amount of my property by exempting it, and that ANY non-exempt property may be taken by the Chapter 7 trustee and sold. I agree to read my final petition and provide accurate information. If ANY property is not claimed exempt the Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest.
- 8. Creditors and the U.S. Trustee can object to discharge in Chapter 7 for many reasons and I have discussed this with my attorney.
- 9. I understand that certain debts such as student loans, child and/or spousal support, recent taxes, fines, matters regarding fraud, traffic and criminal fines and debts creditors successfully object to are NOT dischargeable in Chapter 7.
- 10. If I close my file or breach this contract I agree to pay for the work done up to and including the final closing of the case,
- 11. I/We agree not to incur or transfer debt or property before this case is filed and discharged, without court permission.
- 12. I/We assign to my attorney all amounts tendered as filing fees and authorize my attorney to transfer said funds from his trust account to his operating account if case is not filed.
- 13. I/We have filed all tax returns for last 4 years or will file them before this case is filed. I/We understand that the case will be dismissed by the US Trustee if all tax returns are not filed.
- 14. I agree that more than one attorney may work on my case and that if the firm name or structure changes this agreement remains in force with the new entity. We hire other attorneys to work with this law firm and to attend the meeting of creditors with the trustee. Part of your fees may be paid to them on the basis of work & responsibility.
- 15. I understand that I must keep child support payments current, I also understand that I must provide the name and address for the person receiving the support payments and that he/she may be notified of my bankruptcy.
- 16. Chapter 7 Discharge is subject to Court and creditor approval or objection.
- 17. I/We understand that if I/we have a lawsuit or get served with a summons, I/we agree to do all things necessary to file this bankruptcy case before a judgment is entered. Judgments become liens on all real and personal property, and the resulting lien may not be able to be eliminated. I/We may be asked to provide a real estate appraisal before filing. If I/we have a foreclosure suit pending, I/we understand that it may proceed quickly to a sheriff sale. It is my/our duty to do what is necessary to file this bankruptcy prior to the foreclosure sale. I release Lynch Law Offices, P.C. and their attorneys and their associated attorneys from any liability for judgments resulting in garnishments or liens on property before my case is filed. It is understood that Lynch Law Offices, P.C. does not represent me in any lawsuits and is only representing my/our interests in the bankruptcy matter. Any information or assistance offered by Lynch Law Offices, P.C. in other matters is strictly for informational purposes only and does not constitute legal representation nor legal counsel in that matter.

#### The undersigned client agrees and understands the following

- Two credit counseling classes are required. I will take 2 classes: One Credit Counseling <u>before</u> filing and One Financial Class within 10 days after Filing. I will provide my attorney the certificates to file in court.
- 2. Document production required. Before filing, I agree to supply my attorney with <u>copies</u>, not <u>originals</u>, of a. Last 7 months of pay stubs before filing; b. Last 2 years of filed federal tax transcripts or filed stamped copies of returns; c. The previous 3 months of bank statements for all accounts; d. Proof of all household income I have received in the last 7 months; e. Any documents on the document list we are giving you for your district or that the trustee asks for after filing; f. If you have high credit card balances, the last 2 years

### Lynch Law Offices, P.C.

statements: after filing you may not be able to get them.

- 3. Truthfulness under penalty of perjury: I must tell the truth in all matters and; a. List all creditors. I agree that is my responsibility and I will pay any unlisted creditors; b. List all property including cash value life insurance, household goods and real estate interests; c. List all joint property with others and any transfers of property in last 10 years; d. Supply any information after filing that my attorney or my Trustee requests.
- 4. Chapter 7 or 13 eligibility: The Chapter I can file is determined by my income and expenses allowed under the Bankruptcy / IRS guidelines. It is possible that as I continue to supply information to my attorney, the advice I have been given may change, which may mean that I will have to file a Chapter different from the one I originally agreed to. If that happens, I still have to pay for work done if I decide not to file the bankruptcy.
- 5. Time Sensitive: Do NOT delay in supplying the information that we are requesting. The information and documentation is extremely time sensitive. If my information changes, or I fail to make regular payments no less than each 30 days on fees, and pay my fees and costs in full within 4 months, my case may be closed by this office and I may have to pay all fees in cash with an additional fee to reopen it and continue, and supply necessary information again.
- 6. Tax Refunds: If I receive a tax refund, it is possible that there has been over-withholding too much tax, creating excess income I could use now to pay expenses or debt. I agree to turn over any tax refunds due or received after filing to the Trustee. I have been advised to go to my tax preparer or an IRS service office and adjust my withholding before filing so it covers my tax liability and no more.
- 7. Credit Report Consent: I give authorization for Online Credit Reporting Corporation to access my credit report information including all medical information being reported and I give authorization for Lynch Law Offices, P.C. to order and review my credit report. By signing this document you are verifying all the information above is correct.

#### **REQUIRED 11 U.S.C. 527 Disclosure**

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

1. If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice."

# **United States Bankruptcy Court** Northern District of Illinois

In re	Candice R Chavez		Case No.				
		Debtor(s)	Chapter	7			
	VERIFICATION OF CREDITOR MATRIX						
	Number of Creditors: 34						
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.						
Date:	July 25, 2018	/s/ Candice R Chavez Candice R Chavez Signature of Debtor					

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

Amita Health 417 Bridge St Danville, VA 24541-1403

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Central DuPage Emergency Physicians PO Box 366 Hinsdale, IL 60522

Dependon Collection Service PO Box 4833 Oak Brook, IL 60523

DuPage Medical Group 1100 W. 31st Street, Suite 300 Downers Grove, IL 60515

DuPage Medical Group 15921 Collections Center Drive Chicago, IL 60693

DuPage Pathology Associates 520 East 22nd Street Lombard, IL 60148

Eos Cca Po Box 981002 Boston, MA 02298-1002 ERC
PO Box 23870
Jacksonville, FL 32241-3870

Firstsource Advamtage 205 Bryant Woods South Buffalo, NY 14228

Grant & Weber, Inc. 5586 S. Fort Apache Road Suite 110 Las Vegas, NV 89148

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Emergency Med Specialists PO Box 75121 Chicago, IL 60675-5121

Internal Revenue Service (IRS) PO Box 7346 Philadelphia, PA 19101-7346

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Merchant's Credit Guide Co. 223 W Jackson Blvd # 700 Chicago, IL 60606

Merchants' Credit Guide Co. 223 W. Jackson Blvd #700 Chicago, IL 60606

Midwest Anes Partners PO Box 3613 Carol Stream, IL 60132 MRS BPO LLC 1930 Olney Avenue Cherry Hill, NJ 08003

Nationwide Credit & Collection c/o Evergreen Bank Group PO Box 3219 Oak Brook, IL 60522-3219

Nationwide Credit & Collections, Inc Attn: Bankruptcy 815 Commerce Dr Ste 270 Oak Brook, IL 60523

Northwestern Medicine PO Box 4090 Carol Stream, IL 60197-4090

Physicians Immediate Care-Chicago Attn: Billing Department Carol Stream, IL 60197-8799

Receivables Management Partners, LL 2250 E Devon Ave, Ste 352 Des Plaines, IL 60018-4521

Receivables Management Partners, LL 2250 E Devon Ave Ste 245
Des Plaines, IL 60018-4521

Suburban Radiologists, SC. 1446 Momentum Place Chicago, IL 60689-5314

Sudarshan Sharma MD 121 North Elm Street Hinsdale, IL 60521-3765

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Verizon Attn: Wireless Bankrupty Admin 500 Technology Dr Ste 500 Weldon Springs, MO 63304

Winfield Laboratory Consultants, SC Dept 4408 Carol Stream, IL 60122

Winfield Pathology Consultants Dept 4432 Carol Stream, IL 60122

Winfield Radiology Consultants 29050 Network Place Chicago, IL 60673